| Effective Atober 1, 2000  |   |   |              |                                   |              |                  | <u>09/937622</u>    |                        |      |                            |                        |
|---|---|---|--------------|-----------------------------------|--------------|------------------|---------------------|------------------------|------|----------------------------|------------------------|
|   |   | CLAIMS A                                  | S Fi (Columi |                                   |              |                  | SMALLE<br>TYPE      | SMALL ENTITY TYPE      |      | OTHER THAN OR SMALL ENTITY |                        |
| TOTAL CLAIMS  |   |   |              |                                   |              |                  | RATE                | FEE                    | 7    | RATE                       | FEE.                   |
| FOR   |   |   | NUMBER FILED |                                   | NUME         | BER EXTRA        | BASIC FEI           |                        | OR   | BASIC FEE                  | 860                    |
| TOTAL CHARGEABLE CLAIMS   |   |   | minus 20= '  |                                   | *            |                  | X\$ 9=              |                        | OR   |                            | 3-5                    |
| INDEPENDENT CLAIMS  |   |   | 3 minus 3 =  |                                   | *            |                  | X40=                |                        | OR   | X80=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |              |                                   |              |                  | +135=               |                        | OR   |                            |                        |
| * If the difference in column 1 is less than a  |   |   |              | ero, entei                        | r "0" in o   | column 2         | TOTAL               | -                      | OR   | TOTAL                      | 860                    |
|   |   |   |              |                                   | nn 2)        | (Column 3)       | SMALL               | ENTITY                 | OR   | OTHER<br>SMALL             |                        |
| AMENDMENT A   |   | CLAIMS REMAINING AFTER AMENDMENT          |              | HIGH<br>NUM<br>PREVIC<br>PAID     | BER<br>OUSLY | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | . 8                                       | Minus        | ** /                              |              | = /              | X\$ 9=              |                        | OR   | X\$18=                     |                        |
|   | Independent   | NTATION OF M                              | Minus        | ***                               | CLAIM        |                  | X40=                |                        | OR   | X80=                       |                        |
|   | TINOTTALSE  | INTATION OF W                             | OLITEE DE    | relybent                          | CLAIIVI,     | <u></u>          | +135=               | :                      | OR   | +270=                      |                        |
|   |   |   |              |                                   |              |                  | TOTAL<br>ADDIT. FEE |                        | OR   | TOTAL<br>ADDIT. FEE        |                        |
|   |   | (Column 1)                                | ·            | (Colün                            |              | (Column 3)       |                     |                        | - ,  |                            |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUME<br>PREVIC<br>PAID I  | BER<br>OUSLY | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **.,                              |              | =                | X\$ 9=              |                        | OR   | X\$18=                     | -                      |
|   | Independent   | NTATION OF MA                             | Minus        | ***                               | OLAINA:      |                  | X40=                |                        | OR   | X80=                       |                        |
| <u> </u>  | FINST PRESE   | NTATION OF MU                             | JETIPLE DEF  | ZENDENT                           | CLAIM        |                  | +135=               |                        | OR   | +270=                      |                        |
|   |   |   | ,            |                                   |              |                  | TOTAL<br>ADDIT. FEE |                        | OR 2 | TOTAL<br>ADDIT. FEE        | <u> </u>               |
|   |   | (Column 1)                                |              | (Colum                            | nn 2)        | (Column 3)       | 7,007               |                        | ,    |                            |                        |
| AMENDMENT C   |   | CLAIMS REMAINING AFTER AMENDMENT          |              | HIGHE<br>NUME<br>PREVIO<br>PAID F | BER<br>USLY  | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE /                     | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                                |              | =                | X\$ 9=              |                        | OR   | X\$18=                     |                        |
|   | Independent   | *   | Minus        | ***                               | OL AUIA      | =                | X40=                |                        | OR   | X80=                       |                        |
| L   | FIND PHESE  | NTATION OF MU                             | JUITE DEF    | ENDENI                            | CLAIM        |                  | +135=               |                        | OR   | +270=                      |                        |
| • 1   | <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> </ul> |   |              |                                   |              |                  |                     |                        |      | TOTAL                      |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |              |                                   |              |                  |                     |                        |      |                            |                        |